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PTO/SB/01 (12/97)
Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	28569.8300
	First Named Inventor	Chikashi INOKUCHI, et al.
	COMPLETE IF KNOWN	
	Application Number	/ To be assigned
	Filing Date	February 20, 2001
	Group Art Unit	To be assigned
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)
	Examiner Name	To be assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

LASER POWER CONTROL DEVICE AND OPTICAL DISK APPARATUS

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above:

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/JP99/04506 10-233942 10-364551	PCT	08/20/2099	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Japan	08/20/2098	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Japan	12/22/2098	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
<input type="text"/>	<input type="text"/>

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/JP99/04506	08/20/2009	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transmit all business in the Patent and Trademark Office connected therewith:

☒ Customer Number 20322
OR
☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 20322 OR ☒ Correspondence address below

Name	<u>Michael K. Kelly</u>					
Address	<u>SNELL & WILMER, LLP</u>					
Address	<u>One Arizona Center, 400 East Van Buren Street,</u>					
City	<u>Phoenix</u>	State	<u>AZ</u>	ZIP	<u>85004-2202</u>	
Country	<u>USA</u>	Telephone	<u>(602) 382-6291</u>		Fax	<u>(602) 382-6070</u>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

☐ A petition has been filed for this unsigned inventor

Name of Sole or First Inventor:

Given Name (first and middle (if any))	Family Name or Surname
<u>Chikashi</u>	<u>INOKUCHI</u>

Inventor's Signature					Date		
Residence: City	<u>Osaka</u>	State		Country	<u>Japan</u>	Citizenship	<u>Japan</u>
Post Office Address	<u>2-17-13, Fujisakamoto-machi, Hirakata-shi,</u> JPX						
Post Office Address							
City	<u>Osaka</u>	State		ZIP	<u>573-0157</u>	Country	<u>Japan</u>

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Shigeru				FURUMIYA			
Inventor's Signature						Date	
Residence: City	Hyogo	State		Country	Japan	Citizenship	Japan
Post Office Address	1-11-22-2, Tsujii, Himeji-shi,						
Post Office Address							
City	Hyogo	State		ZIP	670-0083	Country	Japan
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Yoshiyuki				MIYABATA			
Inventor's Signature						Date	
Residence: City	Kyoto	State		Country	Japan	Citizenship	Japan
Post Office Address	5-D9-502, Otokoyamasasatani, Yawata-shi,						
Post Office Address							
City	Kyoto	State		ZIP	614-8372	Country	Japan
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Yuji				HISAKADO			
Inventor's Signature						Date	
Residence: City	Osaka	State		Country	Japan	Citizenship	Japan
Post Office Address	2-1-10-1004, Mattaomiya, Tsurumi-ku, Osaka-shi						
Post Office Address							
City	Osaka	State		ZIP	538-0031	Country	Japan

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Atsushi				MIYAZAKI			
Inventor's Signature						Date	
Residence: City	Kyoto	State		Country	Japan	Citizenship	Japan
Post Office Address	138-8, Shimizu-cho, Hazuka-shi, Fushimi-ku, Kyoto-shi,						
Post Office Address							
City	Kyoto	State		ZIP	612-8485	Country	Japan
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Toshiya				AKAGI			
Inventor's Signature						Date	
Residence: City	Osaka	State		Country	Japan	Citizenship	Japan
Post Office Address	33-19-303, Miyukihigashi-machi, Neyagawa-shi,						
Post Office Address							
City	Osaka	State		ZIP	572-0055	Country	Japan
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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